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For information regarding the EMR-ISAC visit www.usfa.dhs.gov/emr-isac or contact the EMR-ISAC office at: (301) 447-1325 and/or emr-isac@fema.dhs.gov.

The InfoGram

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ATF Training Videos Look At Ventilation Flow

The Bureau of Alcohol, Tobacco, Firearms and Explosive's (ATF's) [Fire Research Laboratory](#) partnered with the [Montgomery County \(Maryland\) Fire and Rescue Service](#) (MCFRS) to produce a three-part video/training series. The series focuses on uni-directional flow path, what affects it, why it is more lethal than bi-directional flow, and how it affects tactics on the fireground. Each video is about an hour long.

- Video One focuses on the line-of-duty-death of Baltimore County Firefighter Mark Falkenhan, modelling the fire and the flow path, fuels, and tactics;
- Video Two discusses flow paths and other line-of-duty-deaths;
- Video Three talks about tactical concerns, PPE limits, and the problems of modern fuels in relation to flow paths.

The video's findings reflect those found in other technical studies, calling for a change in firefighting tactics. In his introduction, the MCFRS Chief says "some of the conclusions will be controversial and emotional for those of you who want to remain anchored in tradition. It will challenge many of the principles you were taught."

Video links and more information can be found on FireFighterCloseCalls.com.

(Source: FireFighterCloseCalls.com)

Course: Fire Response with Limited Staffing

Volunteer and combination fire departments often have a limited initial response to fires or incidents simply because of the nature of these departments. The latest training from the [Firefighters Support Foundation](#), "[Where's the Cavalry? Initial Management of a Structure Fire with Limited Manpower](#)," discusses common issues during low staffing situations.

Departments relying on people who may be at work or at a family function can find themselves with too few people to begin an initial fire attack for a period of time. The training addresses things that can be accomplished before more help arrives, such as questioning witnesses, turning off utilities, stretching lines, and initial size-up.

The training also discusses the Occupational Safety and Health Administration's Two-In/Two-Out rule and how it may apply to your department; the National Fire Protection Association (NFPA) 1500 standard; and the ongoing studies of the changes in modern fire behavior versus outdated fire response.

The InfoGram is distributed weekly to provide members of the Emergency Services Sector with information concerning the protection of their critical infrastructures.

The 30-minute video is accompanied by a PowerPoint slide presentation. Both are available for free download through either FireEngineering.com or Jems.com.

(Source: [FSF](#))

Joplin Hospital Takes Steps to Harden Facility

In 2011, Joplin, Missouri's St. John's Regional Medical Center was only 300 feet from the path of the EF-5 tornado that devastated the town. The buildings, built in 1965, lost all power including emergency generators, had 80 percent of their windows broken, and a partial roof and interior wall collapse. The National Institute of Standards and Technology (NIST) published an [extensive report detailing the damage](#) (PDF, 38 Mb) to this and other buildings in Joplin.

The hospital is being rebuilt at a new location as [Mercy Hospital Joplin](#), and the project's aim is to [make sure the kind of damage seen in 2011 cannot repeat itself](#). Windows are breakage-resistant and well tested; two sets of water, data, and power lines come in from different directions; and reinforced safe zones are on each floor.

The construction firm's project director for the rebuild stated "a hospital full of patients should never be reduced to rubble in a matter of minutes. That is the motivation...not only keep occupants alive during an EF-5 tornado, but actually keep the hospital operational after the event." \$11 million of the \$350 million construction budget is going toward storm-hardening improvements.

These changes appear to go well beyond the [new requirements proposed by the Department of Health and Human Services](#) (HHS). Proposed changes would affect a range of facilities from major hospital systems down to small nursing homes and dialysis centers, and compliance would be required to participate in the Medicare and Medicaid programs. Though very contested, HHS believes such required disaster planning will save lives.

(Source: [NIST](#))

Vetting Tool for Cellphone and Mobile Apps

Applications (apps) on mobile devices can be as big a hazard to a business or government agency's network as a computer virus. Many places of work now have a "Bring Your Own Device" policy, but most do not test or vet their employees' apps. When testing apps, IT staff must use several testing tools because there isn't one that tests for everything. This takes time and is a complex process.

[AppVet](#), from National Institute of Standards and Technology, takes the complexity out by managing the process. Multiple tools are still used, but AppVet combines their findings into one risk assessment report. Government agencies and businesses can take that one report and determine if the app poses a data security threat to their network, and accept or reject the app.

This tool is free and was developed from some of NIST's research for the Defense Advanced Research Projects Agency (DARPA), when apps were being tested for military use. This free online tool can help businesses, [government agencies](#), and first responder departments looking to keep networks, computers, and data secure.

(Source: [NIST](#))

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